<u>Sandia National Laboratories</u> <u>Office of Small Business Advocacy - Mentor/Protégé Program</u>

MENTOR APPLICATION FORM

Type of Men	tor:			
• SN	NL Employee:			
	Name			
	Position		Organization	
	Phone	Fax	Email	
• La	rge Business (over 500 er	nployees)		
	Company Name			
	Contact Name			
	Position			
	Address			
	Phone	Fax	Email	
			E-Commerce Capable	
			Supplier to SNL?	
	Primary SIC/NAICS		_Primary Goods/Services Sup	plied:
• Sn	nall Business (under 500 c Company Name			
	Contact Name			
	Position			
	Address			
	Phone	Fax	Email	
	Web site Address:		E-Commerce Capable	Y/N
	Years in Business		Supplier to SNL?	
	Primary SIC/NAICS	Primary SIC/NAICS Primary Goods/Services Suppl		

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• Busine	ess Assistance:			
	RFP Development			
□ General Business Management				
	Understanding of Government/Commercial Procurement Practices			
	Marketing/Building Awareness			
	Quality Management/Control Other (please detail)			
J	Other (preuse detain)			
_	Availability:			
	Hours per week:			
	AM/PM			
	Geographical Area:			
Statewide Central New Mexico (Albuquerque and Surrounding Area) Northeastern New Mexico Southeastern New Mexico Southwestern New Mexico Colorado Utah				
			Aı	rizona
			Te	exas (Pantex area or El Paso County)
			ase list wh	ich cities in regions checked you are willing to serve:
			y do you v	vish to be a mentor to small business?
			ase attach	2 client letters of reference or list below 2 clients we could contact fo

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